



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**CANDIDATE COMMITTEE
COVER PAGE**

FILED
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CLERK
MICHIGAN

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: <u>1</u> <u>29</u> <u>04</u> to <u>7</u> <u>18</u> <u>04</u> Mo Day Year Mo Day Year	
1. Committee I.D. Number <u>137330</u>	4. Candidate Last Name <u>Hawatmeh</u> First Name <u>Nicola</u> M.I. <u>I</u>
2. Committee Name <u>Committee to Elect Nicola Hawatmeh</u>	4a. Office Sought Including District # or Community Served (If applicable) <u>Macomb County Commissioner District 5</u>
	4b. County of Residence <u>Macomb</u>
5. Committee's Mailing Address <u>32047 Vegas Drive</u> <u>Warren, MI 48093</u> Area Code and Phone <u>586-264-9776</u>	6. Treasurer's Name & Residential Address <u>Nicola Hawatmeh</u> <u>32047 Vegas Dr.</u> <u>Warren, MI 48093</u> Area Code & Phone <u>(586) 264-9776</u>
7. Treasurer's Business Address <u>32047 Vegas Dr.</u> <u>Warren, MI 48093</u> Area Code and Phone <u>(586) 264-9776</u>	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper) Area Code and Phone ()

9. TYPE OF STATEMENT

9a. ☒ Pre-Election

OR

9b. ☐ Post-Election

Pre-Election or Post-Election Statement relates to:

☒ Primary

☐ General

☐ Convention

☐ School

☐ Special

☐ Caucus

Date of Election, Convention or Caucus

08 03 04
Month Day Year

9c. ☐ Annual Statement (Coverage Year)

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution

Month Day Year

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or Designated Record keeper	<u>Nicola Hawatmeh</u>	<u>Nicola Hawatmeh</u>	Date	<u>8</u>	<u>3</u>	<u>04</u>
	Type or Print Name	Signature		Mo	Day	Year
Candidate	<u>Nicola Hawatmeh</u>	<u>Nicola Hawatmeh</u>	Date	<u>8</u>	<u>3</u>	<u>04</u>
	Type or Print Name	Signature		Mo	Day	Year



**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>10,222.45</u>	(18.) \$ <u>10,222.45</u>
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>NOT APPLICABLE</u>	(19.) \$ <u>0</u>
c. Subtotal of "Contributions"	(3c.) \$	<u>0</u>	(20.) \$ <u>10,222.45</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>10,222.45</u>	
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>10,222.45</u>	
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0</u>	(21.) \$ <u>0</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0</u>	(22.) \$ <u>0</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>4822.04</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>4822.04</u>	(23.) \$ <u>4822.04</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0</u>	(24.) \$ <u>0</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>0</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>0</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) + \$	<u>10,222.45</u>	
15. SUBTOTAL Add lines 13 and 14	(15.) = \$	<u>10,222.45</u>	
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) - \$	<u>4,822.09</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>5,400.36</u>	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137330
2. Committee Name C.T.E Nicola Hawahmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES - 4. Date of Receipt <u>2/19/04</u> Name: <u>Sheila Romanik</u> Address: <u>30517 Pinto</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Bartender</u> Employer <u>K of C Hall</u> Business Address <u>16831 12 Mile Roseville, MI</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$55.00	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2/19/04</u> Name: <u>Michael Uhl</u> Address: <u>22425 Garfield</u> <u>St. Clair Shores, MI 48082</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$55.00	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2/19/04</u> Name: <u>Mary Kamp</u> Address: <u>26820 Wexford</u> <u>Warren, MI 48091</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$50.00	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: <u>Dean Sanders</u> Address: <u>32102 Vegas Dr.</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$110.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		270.-	

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137330
2. Committee Name C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 Name: <u>David Koury</u> Address: <u>32730 Cambridge Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$55.00	
3. Contribution #2 Name: <u>Keith Rengert</u> Address: <u>34080 Armada Ridge Road Richmond, MI 48062</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$55.00	
3. Contribution # 3 Name: <u>Patricia Urbin</u> Address: <u>28851 Ironwood Dr Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$110.00	
3. Contribution # 4 Name: <u>Harbi Jaber</u> Address: <u>29301 Desmond Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$110.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		330. -	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137330
2. Committee Name C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES Name: <u>Ibrahim Safadi</u> Address: <u>11105 Chippewa Dr</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Engineer</u> Employer <u>Chrysler</u> Business Address <u>800 Chrysler Dr. Auburn Hills, MI 48326</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$150.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name: <u>Sabah Hawatmeh</u> Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation <u>Teacher's Aide</u> Employer <u>Warren Consolidated</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$500.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name: <u>Roxanne Garrish</u> Address: <u>2322 Columbia Dr</u> <u>Troy, MI 48063</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$40.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES Name: <u>Marvin Burbary</u> Address: <u>6027 Pointe Tremble Road</u> <u>Algonac, MI 48001</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$110.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		800.-	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name: <u>Thomas Zontini</u> Address: <u>36545 Little Mack Ave.</u> <u>Clinton Township, MI 48035</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$ 20.00	
3. Contribution #2 Name: <u>Kenneth Sanborn</u> Address: <u>32044 Vegas Dr.</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$ 110.00	
3. Contribution #3 Name: <u>Janet Safadi</u> Address: <u>1344 Somersct</u> <u>Grosse Pointe Park, MI 48230</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$ 200.00	
3. Contribution #4 Name: <u>Salwa Anwad</u> Address: <u>26552 Wagner</u> <u>Warren, MI 48089</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Homemaker</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$ 220.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		550.-	

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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137330
2. Committee Name C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES Name: <u>Gerald Stewart</u> Address: <u>11549 Irvington Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$110.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name: <u>Sharon Ryterski</u> Address: <u>14567 26 Mile Road Washington Twp, MI 48094</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Manager</u> Employer <u>Howard's Jewelry</u> Business Address <u>34228 Van Dyke St Hts, MI 48312</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$150.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name: <u>C.T.E. Michael Wiecek</u> Address: <u>32116 Vegas Dr Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Councilman</u> Employer <u>City of Warren</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$110.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES Name: <u>Aziz Harb</u> Address: <u>25033 Anchorage Harrison Township, MI 48045</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Golden Donut's</u> Business Address <u>34155 Harper Clinton Township, 48035</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$200.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		570.00	



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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name: <u>Marguerite Wojtowicz</u> Address: <u>39190 cloverleaf</u> <u>Harrison Township, MI 48045</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	50.00	
3. Contribution #2 Name: <u>Marguerite Wojtowicz</u> Address: <u>39190 cloverleaf</u> <u>Harrison Township, MI 48045</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Assistant Manager</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$ 165.00	
3. Contribution #3 Name: <u>Nicola Hawatmeh</u> Address: <u>32047 Vegas Dr</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>Howard's Jewelry</u> Business Address <u>34228 Van Dyke</u> <u>Sterling Heights, MI 48312</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$ 177.45	
3. Contribution #4 Name: <u>Dawn Hill</u> Address: <u>11353 Meadowbrook</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Data Analyst</u> Employer <u>E.D.S</u> Business Address <u>800 Tower Drive</u> <u>Troy, MI 48098</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$ 165.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		557.45	

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MICHIGAN DEPARTMENT OF STATE
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CANDIDATE COMMITTEE

1. Committee I.D. Number 137330
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Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
<p>3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2/19/04</u></p> <p>Name: <u>Dan Melnyk</u></p> <p>Address: <u>26727 Newport</u> <u>Warren, MI 48089</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ 50.00	
<p>3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2/19/04</u></p> <p>Name: <u>Hanna Abouzaia</u></p> <p>Address: <u>31135 Fairfield</u> <u>Warren, MI 48088</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ 50.00	
<p>3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2/19/04</u></p> <p>Name: <u>Eugene Sawyer</u></p> <p>Address: <u>32332 Cambridge</u> <u>Warren, MI 48093</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ 25.00	
<p>3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>2/19/04</u></p> <p>Name: <u>Jacqueline Debrowsky</u></p> <p>Address: <u>3519 Dallas</u> <u>Warren, MI 48091</u></p> <p>5. If over \$100.00 cumulative, please provide:</p> <p>Occupation _____ Employer _____</p> <p>Business Address _____</p> <p>Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser</p>		\$ 40.00	
<p>Page Subtotal</p> <p>Grand Total of All Schedules 1A (Complete on last page of Schedule)</p>		165.-	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 Name: <u>Ron Singer</u> Address: <u>31120 Nelson Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$20.00	
3. Contribution #2 Name: <u>Harvey Dean</u> Address: <u>32845 Coventry Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$55.00	
3. Contribution #3 Name: <u>John Gumela</u> Address: <u>11115 Chippawa Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$100.00	
3. Contribution #4 Name: <u>Rebecca Najor</u> Address: <u>34665 Esper St Hts, MI 48312</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>2/19/04</u>	\$55.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		230.-	

Enter this total on
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Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>2/19/04</u> Name: <u>Kathy Vosburg</u> Address: <u>47395 Sugarbush</u> <u>Chesterfield, MI 48047</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 55.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>2/19/04</u> Name: <u>Anthony Aubrey</u> Address: <u>43459 Chardonway</u> <u>St Albans, MI 48314</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Motor City Pawn Brokers</u> Business Address <u>22100 Van Dyke Warren, MI 48089</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 275.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>2/19/04</u> Name: <u>William Salata</u> Address: <u>14265 Newburgh</u> <u>Livonia, MI 48154</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 55.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>2/19/04</u> Name: <u>Shaker Kandah</u> Address: <u>37709 Santa Barbara</u> <u>Clinton Twp, MI 48036</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Macomb Courthouse Cafe</u> Business Address <u>Mt Clemens</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 100.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		485.00	

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line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137330
2. Committee Name C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>2/19/04</u> Name: <u>Joseph Saleh</u> Address: <u>13959 Diversion St Hrs, MI 48313</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 55.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>2/19/04</u> Name: <u>Debra Brent</u> Address: <u>29010 Lancaster Apt 102 Southfield, MI 48034</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 55.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>2/19/04</u> Name: <u>Amal David</u> Address: <u>44330 Deep Hollow Circle Northville, MI 48167</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Bilingual Director</u> Employer <u>Detroit Public Schools</u> Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 110.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. Date of Receipt <u>2/19/04</u> Name: <u>Carolyn Mocerri</u> Address: <u>8634 Edna Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$ 50.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		270. -	

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line 3 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO Name: <u>James Fouts</u> Address: <u>28107 St. Louise Dr.</u> <u>Warren, MI 48092</u> 4. Date of Receipt <u>2/19/04</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$55.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO Name: <u>C.T.E Keith Sadowski</u> Address: <u>4759 Hayman</u> <u>Warren, MI 48092</u> 4. Date of Receipt <u>2/19/04</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$55.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO Name: <u>Joseph Eaden</u> Address: <u>7674 Cherrywood Dr.</u> <u>Westland, MI 48185</u> 4. Date of Receipt <u>2/19/04</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Builder/contractor</u> Employer <u>Self Employed</u> Business Address <u>7674 Cherrywood Dr. Westland, MI 48185</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$200.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES <input type="checkbox"/> NO Name: <u>Remon Safadi</u> Address: <u>22332 Rosedale</u> <u>St. Clair Shores, MI 48080</u> 4. Date of Receipt <u>2/19/04</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Builder/contractor</u> Employer <u>Self Employed</u> Business Address <u>22332 Rosedale St. Clair Shores MI 48080</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$200.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		510.-	

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line 3 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C. T. E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt 2/19/04

Name: Ghada Mesleh

Address: 14138 Irvington
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$55.00

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt 2/19/04

Name: Charmaine Najor

Address: 34665 Esper
Sterling Heights, MI 48312

5. If over \$100.00 cumulative, please provide:

Occupation Hairdresser Employer Self

Business Address 34665 Esper St Hts. MI 48312

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$165.00

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt 2/19/04

Name: Steven Freers

Address:

5. If over \$100.00 cumulative, please provide:

Occupation Attorney Employer Self

Business Address 31730 Hoover Suite C Warren, MI 48093

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$110.00

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt 2/19/04

Name: Helen Krystowczyk

Address: 11210 Capri Dr
Warren

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$110.00

Page Subtotal

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

440.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES Name: Beverly Bezutich Address: 32020 Vegas Dr. Warren, MI 48093 4. Date of Receipt 2/19/04 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$55.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES Name: Nicola Hawatmeh Address: 32047 Vegas Dr. Warren, MI 48093 4. Date of Receipt 1/27/04 5. If over \$100.00 cumulative, please provide: Occupation Sales Employer Howard's Jewelry Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$100.00	\$277.45
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES Name: Patricia O'Brien Address: 33215 Eiford St St Hts, MI 48312 4. Date of Receipt 7/14/04 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$20.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES Name: Andrea Romanik Address: 30517 Pinto Warren, MI 48093 4. Date of Receipt 7/14/04 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser		\$55.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		230.00	

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line 3 of Summary
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MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Charles Pierce

Address: 39223 Canterbury Dr.
Harroon Twp, MI 48045

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

55.00

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Judith Mysliviec

Address: 63271 W. Charleston
Washington, MI 48095

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$ 55.00

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Thomas Zontin

Address: 36545 Little Mack
Clinton Twp, MI 48035

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$ 55.00

\$ 75.00

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Jennifer Faunce

Address: 32768 Lancaster
Warren, MI 48088

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$ 25.00

Page Subtotal

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

190.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hauptmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Jean Uh

Address:

22425 Garfield
St. Clair Shores, MI 48082

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$ 110.00

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Bohdan Melnyk

Address:

26727 Newport
Warren, MI 48089

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$ 110.00

\$ 165.00

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Dean Sanders

Address:

32102 Vegas
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$ 110.00

\$ 220.00

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Ibrahim Safadi

Address:

11105 Chippewa Dr
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation

Engineer

Employer

Chrysler

Business Address

800 Chrysler Dr Auburn Hills, MI 48326

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$ 200.00

\$ 350.00

Page Subtotal

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

530.00

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: John Gumela

Address: 11115 Chippewa Dr
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$100.00

\$200.00

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Fouad Riach

Address: 437 Chalfont
Grosse Pointe Farms, MI 48236

5. If over \$100.00 cumulative, please provide:

Occupation Builder Employer Self

Business Address 437 Chalfont G.P. Farms, MI 48236

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$100.00

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Mary Kamp

Address: 26850 Wexford
Warren, MI 48091

5. If over \$100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$55.00

\$105.00

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Joseph Saleh

Address: 13959 Diversion
St Hts, MI 48313

5. If over \$100.00 cumulative, please provide:

Occupation Employer

Business Address

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$55.00

\$110.00

Page Subtotal

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

310,-



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137330

2. Committee Name C.T.E Nicola Hawatme

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Name: <u>Kenneth Nowak</u> Address: <u>32410 Newcastle Dr.</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>7/14/04</u>	\$110.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Name: <u>Louise Valdivia</u> Address: <u>32101 Vegas Dr</u> <u>Warren, MI 48073</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>7/14/04</u>	\$55.00	\$110.00
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Name: <u>Catherine Lalonde</u> Address: <u>3162 Buckingham</u> <u>Berkley, MI 48072</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>7/14/04</u>	\$55.00	
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Name: <u>Helen Krzystowczyk</u> Address: <u>11210 Capri</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	4. Date of Receipt <u>7/14/04</u>	\$110.00	\$220.00
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		330.00	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137330

2. Committee Name C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Jared Maynard
Address: Vaughn
Clinton Township, MI

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$ 40.00

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Awni Safadi
Address: 1314 Nottingham
Grosse Pointe Park, MI 48230

5. If over \$100.00 cumulative, please provide:

Occupation Builder/Contractor Employer Self Employed

Business Address 1314 Nottingham, G.P.P., MI 48230

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$ 100.00

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Scott Stevens
Address: 8106 Farnum
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$ 55.00

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Arnold Hock
Address: 12152 Carol
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

55.00

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Grand Total of All Schedules 1A
(Complete on last page of Schedule)

250.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 137330
2. Committee Name C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1 PAC Receipt? <input type="checkbox"/> YES - 4. Date of Receipt <u>7/14/04</u> Name: <u>Gerald Stewart</u> Address: <u>11549 Irvington Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 55.00	\$ 165.00	
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/14/04</u> Name: <u>Salwa Awwad</u> Address: <u>26552 Wagner Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 55.00	\$ 275.00	
3. Contribution #3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/14/04</u> Name: <u>Dennis Buchholz</u> Address: <u>cyman Warren, MI 48089</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 165.00		
3. Contribution #4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>7/14/04</u> Name: <u>Anthony Aubrey</u> Address: <u>43459 Chardonway St, Hts, MI 48034</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Owner</u> Employer <u>Motor City Pawn Brokers</u> Business Address <u>22100 Van Dyke Warren, MI 48089</u> Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	\$ 110.00	\$ 385.00	
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		385.-	



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Eugene Sawyer
Address: 32332 Cambridge
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$ 55.00

\$ 75.00

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Michele Urbin
Address: 28851 Ironwood
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$ 55.00

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Joan Greif
Address: 28315 Campbell
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$ 55.00

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 7/14/04

Name: Quality Care Professionals
Address: 42536 Hayes Suite 100
Clinton Township, MI 48038

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

55.00

Page Subtotal
Grand Total of All Schedules 1A
(Complete on last page of Schedule)

220.00



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawahmel

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1 PAC Receipt? ☒ YES 4. Date of Receipt 7/14/04

Name: American Polish Coalition of Republicans

Address: 11927 Hiawatha
Shelby Twp, MI 48315

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$
200.00

3. Contribution #2 PAC Receipt? ☐ YES 4. Date of Receipt 7/14/04

Name: Khalil Atasi

Address: 660 Woodward Ave Suite 750
Detroit, MI 48226

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$
55.00

3. Contribution #3 PAC Receipt? ☐ YES 4. Date of Receipt 7/14/04

Name: Ron Singer

Address: 31120 Nelson
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$ 55.00 \$ 75.00

3. Contribution #4 PAC Receipt? ☐ YES 4. Date of Receipt 7/14/04

Name: Suzanne Susalla

Address: 31526 Hartford
Warren, MI 48088

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

\$
50.00

Page Subtotal

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

360.00



ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report all contributions from committees regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Terri Kowal

Address: 5010

5. If over \$100.00 cumulative, please provide:

Occupation

Clerk

Employer

Shelby Township

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$100.00

3. Contribution #2

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Leon Drolet

Address: 16820 Edlorton Way #172
Clinton Township MI 48038

5. If over \$100.00 cumulative, please provide:

Occupation

State Representative

Employer

State of Michigan

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$100.00

3. Contribution #3

PAC Receipt? ☐ YES

4. Date of Receipt

7/14/04

Name: Phillip Osman

Address: 13239 Teak Court
Sterling Heights, MI 48312

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

Type of Contribution: ☐ Direct

☐ Loan from a person

☒ Fund Raiser

\$25.00

3. Contribution #4

PAC Receipt? ☐ YES

4. Date of Receipt

3/12/03

Name: Nicola Hawatmeh

Address: 32041 Vegas Dr
Warren, MI 48093

5. If over \$100.00 cumulative, please provide:

Occupation

Sales

Employer

Howard's

Business Address

34228 Van Dyke Sterling Hts 48312

Type of Contribution: ☒ Direct

☐ Loan from a person

☐ Fund Raiser

\$1300.00

\$1577.45

Page Subtotal

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

1525



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number 13 7330
2. Committee Name C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.		6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>3/18/04</u> Name: <u>Nicola Hawatmeh</u> Address: <u>32047 Vegas Dr</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>Howard's</u> Business Address <u>34228 Van Dyke St Hts. 48312</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ 500.00	\$ 2077.45
3. Contribution #2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>1/30/04</u> Name: <u>Nicola Hawatmeh</u> Address: <u>32047 Vegas Dr.</u> <u>Warren, MI 48093</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Sales</u> Employer <u>Howard's</u> Business Address <u>34228 Van Dyke St Hts, 48312</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser		\$ 215.00	\$ 2292.45
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt _____ Name: _____ Address: _____ 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser			
Page Subtotal Grand Total of All Schedules 1A (Complete on last page of Schedule)		\$ 715.00	\$ 10,222.45

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number 137330
2. Committee Name CTE NICOLA HAWATMEH

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>THE GAZEBO</u> Address <u>31104 MOVNO RD</u> <u>WARREN MI 48092</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>FUND RAISER DINNER</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>2-19-04</u>	<u>1486²²</u>
Expenditure #2 Name <u>SAWICKI + SON INC</u> Address <u>1521 LAFAYETTE</u> <u>DETROIT MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>YARD SIGNS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-18-04</u>	<u>700.-</u>
Expenditure #3 Name <u>SAWICKI + SON INC</u> Address <u>1521 LAFAYETTE</u> <u>DETROIT MI 48216</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>YARD SIGNS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>3-25-04</u>	<u>760¹⁵</u>
Expenditure #4 Name <u>MACOMB COUNTY CLERK</u> Address <u>40 NORTH MAIN ST</u> <u>MT CLEMENS MI 48043</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>FILING FEE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>1-27-04</u>	<u>100.-</u>
Expenditure #5 Name <u>MACOMB COUNTY REPUBLICANS</u> Address <u>VAN DYKE</u> <u>SHELBY TWP MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>AO</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>4-16-04</u>	<u>75.-</u>

Subtotal this page
Grand Total of all Schedules 1B
(Complete on last page of Schedule)

3121³⁷

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

137330

2. Committee Name

CTE NICOLA HAWATMEH

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>TRIANGLE PRINTING</u> Address <u>30520 GRATIOT AVE</u> <u>ROSEVILLE MI 48066</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>PRINTING FLYERS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/13/04</u>	<u>371. ⁷¹/₁₀₀</u>
Expenditure #2 Name <u>AMERICA'S FINEST PRINTING</u> Address <u>17060 MASONIC BLVD.</u> <u>FRASER MI 48026</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>BUSINESS CARDS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5/20/04</u>	<u>69 ⁶⁰/₁₀₀</u>
Expenditure #3 Name <u>CTE JANICE NEARON</u> Address <input type="checkbox"/> Fund Raiser	Purpose: <u>CONTRIBUTION</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>5-7-04</u>	<u>75 ⁰⁰/₁₀₀</u>
Expenditure #4 Name <u>LINVILLE PRINTING</u> Address <u>32240 GARFIELD</u> <u>FRASER MI 48026</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>PRINT TICKETS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6/25/04</u>	<u>42 ⁴⁰/₁₀₀</u>
Expenditure #5 Name <u>FRASER POST OFFICE</u> Address <u>FRASER MI 48026</u> <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>STAMPS</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>6-25-04</u>	<u>92.50</u>
Subtotal this page Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>651. ²¹/₁₀₀</u>

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure #1 Name <u>The Gazebo</u> Address <u>31104 Mound RD</u> <u>Warren, MI 48092</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Fundraiser Dinner</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-14-04</u>	<u>943.93</u>
Expenditure #2 Name <u>Comerica Bank</u> Address <u>Detroit MI</u> <input type="checkbox"/> Fund Raiser	Purpose: <u>Service Charges,</u> <u>checkbook</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	<u>7-18-04</u>	<u>105.58</u>
Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser	Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement		
Subtotal this page			<u>1049.51</u>
Grand Total of all Schedules 1B (Complete on last page of Schedule)			<u>4822.09</u>

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawahmeh

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

2 19 04
Month Day Year

4. Number of Individuals Attending
or Participating (whichever is
greater)

5. Type of Fund Raising Activity

DINNER

6. Address and Name (If any) of the
place where the activity was held

Gazebo
31104 Mound
Warren, 48092
☐ Private Residence

7. Total Contributions

\$ 5055.00

8. Other Receipts

0

9. Gross Receipts (Add lines 7 and 8)

\$ 5055.00

10. Total Cost of Event

(Total Cost includes In-Kind Contributions
and All Expenditures Made For the Event)

1486.22

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)

Contribution Split
(%)

Expenditure Split
(%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

7 14 04
Month Day Year

4. Number of Individuals Attending
or Participating (whichever is
greater)

65

5. Type of Fund Raising Activity

DINNER

6. Address and Name (If any) of the
place where the activity was held

Gazebo
31104 Mound
Warren, MI 48092
☐ Private Residence

7. Total Contributions

\$ 2875.00

8. Other Receipts

0

9. Gross Receipts (Add lines 7 and 8)

\$ 2875.00

10. Total Cost of Event

(Total Cost includes In-Kind Contributions
and All Expenditures Made For the Event)

\$ 1036.43

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)

Contribution Split
(%)

Expenditure Split
(%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.

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